

Communities That Care Data Workgroup

4/24/2017 6pm Lakeside

Present: Chair Cindi Parker, Sherry Gilliland Cheek, Terry Lerma, Ray Sharp

We reviewed the 6 factors which are all finished at this point.

*Perceived Risk of Drug Use (Terry)

Prosocial Involvement (Terry)

*Low Commitment to School (Sherry)

Perceived Availability of Handguns (Sherry)

*Family History of Antisocial Behavior (Cindi)

*Interaction with Prosocial Peers (Cindi)

I starred the factors we have chosen to recommend for overall vote to the big group

Both Perceived Risk of Drug Use and Low Commitment to School were factors chosen after the 2014 survey. They remain significant issues. There was general discussion about the reasons for this and recognition of how long it takes to make a difference and where things are with the programs that were chosen following the 2014 survey.

Family History of Antisocial Behavior includes not only family members' behaviors but also the behaviors of those around the youth, including unrelated adults.

Interaction with Prosocial Peers appears to be the Protective Factor that needs the most work. We discussed the significant increase in the number of students whose friends don't attend religious services. We also discussed the fact that many students would not mark 'yes' for religious services if they are attending Native American spiritual ceremonies and some of the increase may represent an increase in the number of students attending these rather than traditional religious services and we agreed that the question may not be capturing the full spectrum of religious/spiritual involvement - Terry feels that the number of students attending Native American spiritual ceremonies seems to be going up in her view. Ray commented on how much lower the numbers for this (students with friends NOT attending) are in Houghton County where there are many Apostolic Lutheran youth.

We looked at the data on suicide (low rate for 2015 and 2016) and depression symptoms in our youth. The incidence of depression symptoms was astonishingly high and we decided that we need to highlight that in our report. Sherry reached out to BCMH and is awaiting data related to specific codes indicative of suicidal behaviors even if there was no successful suicide. That will be presented to the group when available.

Cindi reviewed Problem Behaviors and overall, the news is reassuring in that there has been some improvement. It was pointed out that the questions about drugs don't address a growing issue with the abuse of gabapentin (Neurontin). They also don't address edibles. However, overall, the data was reassuring.

Cindi has dates for most of the Key Accomplishments and we plan to hammer out a finished version of the final report at our next meeting. Cindi will bring her computer and we will edit it together. For that meeting, we will each bring brief summaries (paragraphs) of our factors, Sherry will bring a brief summary of the Depression Symptoms data and Cindi will bring a brief summary of Problem Behaviors.

Next meeting will be Monday, May 1, 6pm at Lakeside

Respectfully submitted by Sherry Gilliland Cheek